

# 3.3

**WHAT HEALTH  
CARE SERVICES DO MEDICARE  
BENEFICIARIES RECEIVE?**

**Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Inpatient Hospital Stay							
All Beneficiaries	18.87	14.94	24.51	19.70	19.38	15.19	12.97
	0.41	1.19	0.85	0.74	0.77	1.63	0.83
Medicare Status <sup>3</sup>							
Aged							
65 - 74 years	14.17	10.17*	22.21	14.87	14.50	10.96*	9.20
	0.58	1.76	1.54	1.20	0.98	2.02	1.22
75 - 84 years	21.33	17.48*	28.09	21.14	23.02	18.55*	15.58
	0.68	2.42	2.00	1.40	1.46	2.39	1.65
85 years and older	29.99	26.71*	28.74	32.52	33.90	23.99*	19.87*
	1.28	4.57	2.76	2.32	2.25	6.67	3.07
Disabled							
Under 45 years	17.87	10.81*	20.02	18.68*	12.82*	33.17*	34.75*
	1.27	2.54	1.66	9.16	3.52	20.25	22.86
45 - 64 years	22.85	18.24*	25.44	17.82*	24.85	27.72*	15.12*
	1.75	3.23	2.32	6.01	3.32	12.09	5.27
Gender							
Male	19.23	15.35	23.73	21.16	19.96	18.51	12.70
	0.62	1.75	1.48	1.34	1.04	2.23	1.45
Female	18.57	14.35	24.99	18.71	18.85	12.52*	13.15
	0.48	2.28	1.14	0.89	1.01	2.24	1.06
Living Arrangement							
Alone	18.59	13.54*	22.70	20.15	20.21	12.45*	11.50
	0.65	2.00	1.60	1.23	1.35	2.79	1.32
With spouse	17.29	15.81	22.87	17.14	18.30	15.53	12.71
	0.54	1.74	1.85	0.99	1.05	2.00	1.27
With children	26.13	19.85*	29.54	31.82	25.84	21.96*	18.54*
	1.14	4.36	2.05	3.11	2.60	7.58	2.39
With others	20.10	10.19*	24.76	26.88*	19.01*	18.83*	13.03*
	1.52	2.90	2.31	5.01	3.23	9.65	3.72

**Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Inpatient Hospital Stay							
All Beneficiaries	18.87	14.94	24.51	19.70	19.38	15.19	12.97
	0.41	1.19	0.85	0.74	0.77	1.63	0.83
Race/Ethnicity							
White non-Hispanic	18.88	16.71	26.68	19.24	19.20	15.01	13.65
	0.41	1.53	1.32	0.77	0.76	1.62	0.92
Black non-Hispanic	21.23	13.17*	26.64	24.82*	22.30	13.37*	10.81*
	1.35	2.90	1.91	5.99	3.42	7.03	2.78
Hispanic	16.96	3.91*	19.95	25.73*	20.45*	11.46*	11.02*
	1.38	2.15	2.00	5.50	2.76	7.62	2.94
Other	16.99	13.20*	16.69*	24.54*	15.57*	33.36*	10.55*
	2.03	5.01	2.99	6.67	3.96	15.86	4.13
Income							
Less than \$5,000	20.02	10.89*	23.40*	14.74*	30.66*	15.53*	16.00*
	2.20	3.94	3.55	3.80	6.71	15.48	6.21
\$5,000 - \$9,999	22.13	10.16*	24.38	30.67	16.54*	22.90*	11.65*
	1.00	2.12	1.24	4.15	3.73	16.00	3.24
\$10,000 - \$14,999	20.87	16.68*	25.41	20.07	22.67	10.00*	16.71*
	1.07	2.76	1.83	2.19	2.03	4.80	2.33
\$15,000 - \$19,999	22.36	25.90*	27.30*	23.78	23.22	23.78*	12.21*
	1.35	4.05	4.03	2.14	2.53	7.46	1.85
\$20,000 - \$24,999	18.96	9.21*	21.60*	20.50	23.83	4.97*	15.69*
	1.29	2.88	5.82	2.41	2.50	2.33	2.72
\$25,000 - \$29,999	18.11	13.03*	12.87*	20.25*	20.78	13.58*	13.68*
	1.32	4.18	9.04	3.39	2.02	4.47	3.04
\$30,000 - \$39,999	14.40	13.27*	6.13*	14.60*	15.72	17.34*	8.94*
	0.97	3.12	6.74	1.79	1.30	4.64	2.38
\$40,000 - \$49,999	16.30	16.79*	16.98*	18.31*	17.45	11.83*	11.67*
	1.39	7.70	11.97	3.02	2.10	3.48	3.16
\$50,000 or more	15.85	5.58*	35.43*	15.54	16.92	18.54*	10.60*
	1.03	3.55	24.19	1.74	1.65	3.39	2.20

**Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Inpatient Hospital Stay							
All Beneficiaries	18.87	14.94	24.51	19.70	19.38	15.19	12.97
	0.41	1.19	0.85	0.74	0.77	1.63	0.83
Health Status							
Excellent	8.50	6.43*	9.45*	9.16*	9.98	8.19*	4.16*
	0.60	1.89	2.22	1.35	1.33	1.84	1.16
Very good	12.29	8.77*	17.33	12.30	11.64	12.85*	12.26*
	0.62	2.01	2.20	1.20	0.91	2.61	1.80
Good	18.47	12.75*	18.69	22.30	20.47	14.80*	12.42
	0.71	2.11	1.65	1.42	1.46	3.41	1.39
Fair	28.22	23.40	29.56	32.41	29.73	27.49*	19.45*
	1.14	3.16	1.97	2.58	1.99	4.97	3.04
Poor	38.83	26.03*	35.22	48.60	45.96	56.32*	32.53*
	1.98	5.60	3.12	5.48	3.69	14.11	6.11
Functional Limitation							
None	12.57	10.45	16.42	13.45	13.13	10.61*	8.96
	0.47	1.43	1.19	0.82	0.83	1.66	1.06
IADL only <sup>4</sup>	24.61	16.11*	25.86	27.02	26.98	22.79*	19.09*
	0.98	2.51	2.02	1.76	1.87	4.20	3.09
One to two ADLs <sup>5</sup>	26.53	22.20*	27.36	29.10	29.89	30.73*	15.60*
	1.14	4.67	2.06	2.04	2.38	6.69	2.78
Three to five ADLs	41.63	33.95*	40.90	46.52	44.57	25.74*	38.74*
	2.03	6.44	3.32	4.36	3.51	14.78	6.85

**Table 3.1 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Inpatient Hospital Stay							
All Beneficiaries	18.87	14.94	24.51	19.70	19.38	15.19	12.97
	0.41	1.19	0.85	0.74	0.77	1.63	0.83
Metropolitan Area Resident							
Yes	18.22	12.88	23.15	20.23	19.12	14.70	12.88
	0.49	1.33	1.05	0.94	0.93	1.82	0.84
No	21.14	18.90	28.72	18.64	20.44	17.77*	15.72*
	0.83	2.31	1.48	1.19	1.23	4.05	5.52

Source: Medicare Current Beneficiary Survey, CY 2004 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

Values followed by an asterisk (\*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 HMO stands for Health Maintenance Organization.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 IADL stands for Instrumental Activity of Daily Living.
- 5 ADL stands for Activity of Daily Living.

**Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Outpatient Hospital Visit							
All Beneficiaries	72.31	62.30	75.72	77.50	73.15	73.08	64.15
	0.59	1.78	1.19	0.95	1.04	2.17	1.51
Medicare Status <sup>3</sup>							
Aged							
65 - 74 years	68.82	57.50	73.56	75.69	68.12	70.82	62.18
	0.85	2.89	2.13	1.44	1.38	3.41	2.26
75 - 84 years	74.77	62.32	73.40	78.65	77.40	77.92	67.81
	0.77	3.35	2.33	1.22	1.51	2.70	2.36
85 years and older	75.09	62.25	71.13	79.58	80.26	74.07*	64.10
	1.31	5.30	3.31	1.96	2.19	5.66	3.38
Disabled							
Under 45 years	72.47	55.18	75.38	86.21*	72.11	76.60*	92.85*
	1.70	5.56	2.22	6.74	4.53	17.26	7.42
45 - 64 years	77.68	70.63	81.77	81.45*	83.52	61.99*	53.14*
	1.67	3.74	2.20	6.56	3.21	13.38	8.61
Gender							
Male	69.00	64.17	71.62	74.90	69.42	68.18	60.61
	0.85	2.20	1.77	1.55	1.45	3.79	2.32
Female	74.99	59.52	78.26	79.25	76.57	77.02	66.63
	0.71	3.04	1.49	1.13	1.32	2.26	1.74
Living Arrangement							
Alone	73.10	60.25	77.72	76.33	74.85	82.16	61.83
	0.82	3.27	1.79	1.45	1.77	2.70	2.24
With spouse	72.33	68.01	72.05	77.70	72.63	69.14	66.85
	0.81	2.37	2.06	1.37	1.22	2.79	2.36
With children	72.37	50.77	78.22	79.07	75.79	77.32*	62.74
	1.48	4.77	2.12	3.30	3.28	9.57	3.40
With others	69.60	61.25	74.71	81.21	66.23	77.01*	54.40*
	2.16	5.84	2.56	3.97	4.35	12.26	6.62

**Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Outpatient Hospital Visit							
All Beneficiaries	72.31	62.30	75.72	77.50	73.15	73.08	64.15
	0.59	1.78	1.19	0.95	1.04	2.17	1.51
Race/Ethnicity							
White non-Hispanic	73.45	64.81	76.59	77.89	73.62	74.53	66.76
	0.65	2.01	1.46	1.01	1.12	2.19	1.79
Black non-Hispanic	70.74	59.78	79.42	77.86	71.90	61.06*	50.77
	1.72	4.99	2.33	5.29	3.33	12.11	4.40
Hispanic	68.21	52.45*	73.14	78.99	70.45	63.35*	60.24
	2.05	8.19	2.97	5.17	4.42	12.01	4.14
Other	65.04	54.10*	69.98	64.29*	66.80	72.89*	52.30*
	2.56	8.27	4.00	6.96	5.38	12.09	5.83
Income							
Less than \$5,000	70.68	41.11*	79.54	70.32*	89.76*	61.11*	60.38*
	2.95	8.30	4.65	5.51	4.22	20.55	8.65
\$5,000 - \$9,999	71.57	59.04	75.76	72.73	64.30	70.09*	54.87
	1.44	4.13	1.67	4.07	4.54	16.27	6.97
\$10,000 - \$14,999	70.58	59.36	76.03	75.53	71.38	64.93*	63.90
	1.16	3.50	2.16	2.21	2.51	9.95	2.96
\$15,000 - \$19,999	72.05	65.74	73.40	76.66	76.46	63.33*	64.14
	1.78	4.37	4.99	2.74	2.76	9.26	3.32
\$20,000 - \$24,999	75.01	70.32	71.72*	82.23	78.09	74.36	60.39
	1.57	5.76	7.02	2.56	2.31	5.56	4.61
\$25,000 - \$29,999	71.34	67.01*	72.46*	77.51	69.29	72.62*	69.50
	1.96	6.99	13.66	3.10	3.31	7.33	4.75
\$30,000 - \$39,999	74.97	73.18	57.21*	79.33	74.57	82.10	67.78
	1.46	6.77	14.55	2.66	2.07	4.94	3.69
\$40,000 - \$49,999	73.09	80.19*	78.35*	81.45	70.64	78.89	60.99
	1.91	9.77	13.83	2.78	2.92	4.66	5.90
\$50,000 or more	71.38	50.83*	74.94*	76.12	71.75	70.03	67.71
	1.24	9.32	23.85	2.44	1.90	3.79	3.54

**Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Outpatient Hospital Visit							
All Beneficiaries	72.31	62.30	75.72	77.50	73.15	73.08	64.15
	0.59	1.78	1.19	0.95	1.04	2.17	1.51
Health Status							
Excellent	60.33	48.16	57.94	68.23	60.92	61.92	52.25
	1.43	4.21	4.58	2.80	2.58	4.41	4.56
Very good	67.97	55.68	64.82	74.71	68.82	73.47	60.69
	1.01	4.20	3.00	1.66	1.79	3.64	2.69
Good	74.44	65.37	74.51	79.66	76.54	76.77	66.15
	0.74	3.10	2.16	1.30	1.33	3.23	2.34
Fair	79.88	62.80	80.41	86.96	83.42	83.56	76.57
	1.06	4.19	1.70	1.95	1.71	6.75	3.09
Poor	83.07	82.69	84.06	87.22	81.34	90.55*	75.08*
	1.66	3.73	2.42	3.42	3.59	6.75	5.27
Functional Limitation							
None	67.50	55.20	69.76	73.34	68.96	69.42	59.82
	0.80	2.27	2.04	1.34	1.33	2.95	2.04
IADL only <sup>4</sup>	79.25	69.77	78.91	83.58	82.10	82.97	70.02
	0.88	3.49	1.79	1.51	1.64	2.71	3.00
One to two ADLs <sup>5</sup>	79.69	71.42	81.02	87.82	78.77	83.42*	73.40
	1.49	5.21	2.47	2.10	2.27	6.14	3.72
Three to five ADLs	77.95	76.96	77.61	81.89	77.57	52.84*	80.07
	1.64	5.68	2.87	3.35	3.59	18.03	4.26



**Table 3.2 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Outpatient Hospital Visit							
All Beneficiaries	72.31	62.30	75.72	77.50	73.15	73.08	64.15
	0.59	1.78	1.19	0.95	1.04	2.17	1.51
Metropolitan Area Resident							
Yes	69.90	59.09	73.04	75.13	70.71	71.80	63.69
	0.74	2.61	1.51	1.23	1.31	2.55	1.55
No	80.80	69.05	84.13	82.80	82.25	81.14	78.22*
	0.83	2.04	1.56	1.28	1.40	3.22	9.27

Source: Medicare Current Beneficiary Survey, CY 2004 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

Values followed by an asterisk (\*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 HMO stands for Health Maintenance Organization.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 IADL stands for Instrumental Activity of Daily Living.
- 5 ADL stands for Activity of Daily Living.

**Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Physician/Supplier Service							
All Beneficiaries	95.59	86.53	95.14	97.94	96.56	98.20	95.51
	0.23	1.35	0.58	0.36	0.37	0.74	0.72
Medicare Status <sup>3</sup>							
Aged							
65 - 74 years	94.23	80.06	94.95	97.27	94.61	97.52	95.03
	0.41	2.71	0.95	0.62	0.67	1.15	1.15
75 - 84 years	97.61	92.68	97.23	98.15	98.77	100.00	95.67
	0.31	1.91	0.88	0.44	0.33	0.00	1.01
85 years and older	97.85	93.75	96.11	99.25	99.03	100.00*	95.40
	0.41	2.62	1.39	0.44	0.47	0.00	1.58
Disabled							
Under 45 years	90.49	82.81	90.50	100.00*	95.09	100.00*	100.00*
	1.08	3.80	1.62	0.00	2.46	0.00	0.00
45 - 64 years	95.72	90.62	95.89	100.00*	99.34	90.35*	99.14*
	0.80	2.76	1.22	0.00	0.46	8.43	0.88
Gender							
Male	94.16	85.79	91.54	98.32	95.48	96.96	94.63
	0.38	1.86	1.11	0.48	0.62	1.37	1.10
Female	96.76	87.64	97.37	97.68	97.56	99.20	96.12
	0.31	2.34	0.53	0.52	0.44	0.74	0.80
Living Arrangement							
Alone	96.50	89.10	96.74	97.76	97.05	100.00	96.82
	0.38	2.31	0.74	0.71	0.83	0.00	0.84
With spouse	95.92	88.14	94.55	98.18	96.48	97.22	95.00
	0.29	1.74	1.27	0.41	0.50	1.12	0.97
With children	94.65	83.39	95.51	96.84	96.66	100.00*	95.56
	0.89	3.73	1.14	1.62	1.29	0.00	1.94
With others	91.49	79.82	92.76	98.13	94.70	100.00*	92.85
	1.18	4.59	1.37	1.77	1.84	0.00	3.88

**Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Physician/Supplier Service							
All Beneficiaries	95.59	86.53	95.14	97.94	96.56	98.20	95.51
	0.23	1.35	0.58	0.36	0.37	0.74	0.72
Race/Ethnicity							
White non-Hispanic	96.16	88.51	94.86	98.17	96.72	98.38	95.87
	0.25	1.43	0.80	0.36	0.43	0.78	0.75
Black non-Hispanic	92.19	80.57	94.22	89.61	95.98	100.00*	93.95
	1.02	4.03	0.92	5.49	1.52	0.00	3.52
Hispanic	94.45	82.16	96.40	100.00	94.09	94.81*	95.04
	0.99	5.78	1.18	0.00	2.78	5.17	1.65
Other	95.28	86.07	97.72	96.33	96.82	92.55*	92.14*
	1.30	7.79	1.20	2.46	1.62	7.49	3.60
Income							
Less than \$5,000	88.71	55.47*	95.42	90.22	100.00	100.00*	95.07*
	2.38	9.72	1.45	3.72	0.00	0.00	2.96
\$5,000 - \$9,999	93.31	82.88	94.65	98.18	89.80	100.00*	93.46
	0.74	3.82	0.89	1.04	3.60	0.00	3.22
\$10,000 - \$14,999	94.71	86.59	95.88	97.17	95.60	100.00*	95.89
	0.59	2.84	0.93	1.04	1.23	0.00	1.54
\$15,000 - \$19,999	96.80	92.57	94.73	98.43	98.04	94.82*	97.55
	0.62	2.34	2.66	0.73	0.75	4.62	0.96
\$20,000 - \$24,999	96.81	90.79	95.68*	98.03	98.18	100.00	94.12
	0.54	3.10	3.17	0.83	0.80	0.00	2.11
\$25,000 - \$29,999	96.66	91.63	100.00*	97.67	97.10	100.00	94.93
	0.80	4.10	0.00	1.43	1.32	0.00	2.23
\$30,000 - \$39,999	96.36	92.23	96.47*	97.96	95.94	98.15	96.30
	0.70	4.90	3.95	0.92	1.16	1.91	1.46
\$40,000 - \$49,999	96.77	96.71*	100.00*	100.00	96.46	97.26	91.64
	0.83	3.22	0.00	0.00	1.26	2.64	2.91
\$50,000 or more	96.86	83.12*	100.00*	98.65	96.64	97.76	97.24
	0.60	7.10	0.00	0.84	0.90	1.35	1.16

**Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Physician/Supplier Service							
All Beneficiaries	95.59	86.53	95.14	97.94	96.56	98.20	95.51
	0.23	1.35	0.58	0.36	0.37	0.74	0.72
Health Status							
Excellent	92.41	79.80	87.80	95.46	93.29	94.68	93.54
	0.80	3.99	3.15	1.22	1.33	2.53	2.10
Very good	94.45	78.51	91.51	97.82	95.60	98.86	94.49
	0.56	3.98	1.81	0.59	0.75	1.11	1.25
Good	96.74	90.03	95.63	98.22	97.65	100.00	96.65
	0.40	2.55	0.80	0.55	0.62	0.00	0.92
Fair	97.05	88.65	96.65	100.00	99.62	98.53	95.91
	0.43	2.43	0.84	0.00	0.23	1.59	1.57
Poor	97.46	96.32	97.05	100.00	96.90	100.00*	98.62
	0.63	2.09	1.07	0.00	1.53	0.00	1.43
Functional Limitation							
None	94.19	81.75	92.16	97.01	95.46	97.36	94.68
	0.37	2.23	1.31	0.53	0.54	1.08	0.97
IADL only <sup>4</sup>	97.24	91.10	95.74	99.09	98.99	100.00	96.26
	0.34	2.10	0.87	0.43	0.36	0.00	1.10
One to two ADLs <sup>5</sup>	97.71	93.25	98.30	100.00	97.48	100.00	96.99
	0.39	1.97	0.65	0.00	1.05	0.00	1.56
Three to five ADLs	98.47	96.71	97.53	100.00	98.70	100.00*	100.00
	0.53	1.92	1.00	0.00	0.94	0.00	0.00

**Table 3.3 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Physician/Supplier Service							
All Beneficiaries	95.59	86.53	95.14	97.94	96.56	98.20	95.51
	0.23	1.35	0.58	0.36	0.37	0.74	0.72
Metropolitan Area Resident							
Yes	95.85	86.42	95.15	97.96	96.96	98.55	95.62
	0.28	1.72	0.70	0.42	0.42	0.75	0.73
No	95.08	87.77	95.19	97.87	95.71	96.75	92.02
	0.38	1.87	0.87	0.68	0.63	2.23	4.25

Source: Medicare Current Beneficiary Survey, CY 2004 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

Values followed by an asterisk (\*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 HMO stands for Health Maintenance Organization.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 IADL stands for Instrumental Activity of Daily Living.
- 5 ADL stands for Activity of Daily Living.

**Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Dental Service							
All Beneficiaries	44.17	23.12	23.85	48.63	52.49	70.52	46.80
	0.64	1.56	1.09	1.26	0.98	1.99	1.57
Medicare Status <sup>3</sup>							
Aged							
65 - 74 years	47.34	19.64	23.21	50.99	53.75	72.77	48.47
	0.99	2.27	2.12	2.22	1.50	2.91	2.91
75 - 84 years	46.35	25.68	16.19	48.88	54.01	70.23	48.82
	0.92	3.04	1.78	1.74	1.50	2.56	2.06
85 years and older	36.45	18.84*	15.35*	39.20	43.57	65.68*	38.97
	1.31	4.02	2.35	2.52	2.23	6.45	4.09
Disabled							
Under 45 years	33.54	22.61*	31.36	34.72*	52.65	66.27*	31.76*
	1.68	3.74	1.83	13.29	4.53	19.78	20.83
45 - 64 years	35.31	27.36	29.38	56.06*	48.36	52.11*	30.27*
	1.75	4.05	2.61	10.26	3.37	13.71	5.62
Gender							
Male	43.08	23.38	26.33	44.25	51.49	68.04	46.21
	0.84	1.97	1.56	1.93	1.41	3.52	2.17
Female	45.04	22.74	22.31	51.58	53.42	72.51	47.21
	0.88	2.00	1.40	1.58	1.26	2.18	2.05
Living Arrangement							
Alone	42.15	21.43	22.89	48.38	50.46	72.78	49.51
	1.03	2.41	1.73	1.93	1.60	3.17	2.49
With spouse	49.74	25.19	26.06	50.30	55.30	69.52	48.49
	0.73	2.68	2.51	1.63	1.28	2.71	1.91
With children	30.99	19.39*	18.99	37.99	41.94	66.78*	35.02
	1.46	4.50	2.05	4.30	3.16	8.50	4.12
With others	34.57	23.69*	28.91	49.77*	41.84	87.50*	38.46*
	1.85	4.41	2.61	4.96	4.20	6.77	6.50

**Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Dental Service							
All Beneficiaries	44.17	23.12	23.85	48.63	52.49	70.52	46.80
	0.64	1.56	1.09	1.26	0.98	1.99	1.57
Race/Ethnicity							
White non-Hispanic	47.49	24.56	24.62	49.86	53.91	71.11	48.22
	0.71	1.85	1.52	1.24	1.05	2.02	1.64
Black non-Hispanic	25.83	13.82*	21.61	20.71*	33.44	72.38*	35.74*
	1.63	3.17	2.34	5.26	3.49	9.43	6.24
Hispanic	36.24	24.90*	23.70	40.64*	50.89	77.25*	45.80
	1.79	6.63	2.03	6.47	3.67	9.48	4.56
Other	39.52	24.96*	26.85	43.79*	58.13	39.11*	42.52*
	2.43	6.57	3.48	7.08	4.36	14.09	6.22
Income							
Less than \$5,000	28.99	11.40*	21.97*	41.63*	35.46*	36.64*	47.98*
	2.32	4.37	3.75	6.47	7.12	19.71	8.54
\$5,000 - \$9,999	26.15	17.66*	23.92	33.25	41.57	64.61*	30.61*
	1.44	3.39	1.60	3.62	5.64	17.38	5.74
\$10,000 - \$14,999	31.18	21.19	22.01	42.24	34.71	41.50*	36.12
	1.31	2.46	2.38	3.20	2.52	9.86	3.34
\$15,000 - \$19,999	38.73	21.97*	30.75*	41.61	44.77	64.59*	36.33
	1.55	4.27	3.77	2.88	3.01	9.19	3.54
\$20,000 - \$24,999	42.80	25.09*	24.92*	36.88	45.97	67.52	48.27
	1.69	5.37	7.95	3.28	3.11	5.74	3.62
\$25,000 - \$29,999	46.50	28.37*	23.65*	46.55	47.95	63.95*	46.95
	1.99	6.61	12.51	3.49	3.44	7.38	5.00
\$30,000 - \$39,999	53.67	38.74*	31.54*	57.43	52.91	69.98	50.29
	1.56	7.28	10.47	3.16	2.27	4.77	3.06
\$40,000 - \$49,999	58.93	29.34*	33.36*	59.13	59.37	75.85	51.74
	1.77	12.13	15.32	3.75	2.76	4.88	5.39
\$50,000 or more	69.50	28.96*	15.05*	69.92	68.67	80.53	73.10
	1.34	6.79	17.46	2.88	2.23	3.68	3.10

**Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Dental Service							
All Beneficiaries	44.17	23.12	23.85	48.63	52.49	70.52	46.80
	0.64	1.56	1.09	1.26	0.98	1.99	1.57
Health Status							
Excellent	53.89	29.85*	27.22	54.71	57.15	77.27	58.25
	1.46	3.85	4.01	2.53	2.60	4.43	3.46
Very good	50.52	19.10*	23.88	54.56	57.51	71.54	50.23
	1.05	2.93	2.66	2.26	1.64	3.52	2.31
Good	45.17	24.26	26.29	48.27	53.73	71.80	44.19
	0.96	2.63	2.27	1.95	1.72	3.71	2.69
Fair	32.00	21.55*	20.69	33.85	41.84	58.32*	39.43
	1.41	3.48	2.12	3.03	2.07	7.33	3.82
Poor	29.63	22.08*	24.01	35.31*	37.96	41.46*	29.33*
	1.89	5.99	2.72	5.19	3.73	12.27	6.48
Functional Limitation							
None	49.13	22.05	22.34	52.24	57.16	73.15	50.99
	0.89	1.91	1.65	1.52	1.29	2.45	2.05
IADL only <sup>4</sup>	41.08	27.59	25.39	47.03	49.26	65.27	41.10
	1.13	4.24	2.00	2.17	2.02	4.33	4.18
One to two ADLs <sup>5</sup>	34.55	18.29*	26.75	39.45	39.95	70.30*	36.69
	1.53	3.70	2.75	3.11	2.81	6.11	4.10
Three to five ADLs	28.32	28.02*	19.76	30.21*	33.64	41.08*	37.83*
	1.59	5.50	2.38	4.71	3.43	15.30	6.88



**Table 3.4 Dental Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Dental Service							
All Beneficiaries	44.17	23.12	23.85	48.63	52.49	70.52	46.80
	0.64	1.56	1.09	1.26	0.98	1.99	1.57
Metropolitan Area Resident							
Yes	46.85	25.40	25.59	51.15	54.98	75.44	47.08
	0.73	2.20	1.23	1.43	1.21	2.17	1.58
No	35.78	19.15	18.65	43.43	44.00	54.32	38.22*
	1.36	1.68	2.19	2.52	1.44	4.39	9.07

Source: Medicare Current Beneficiary Survey, CY 2004 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

Values followed by an asterisk (\*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 *HMO* stands for Health Maintenance Organization.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

**Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Prescribed Medicine							
All Beneficiaries	92.24	78.30	92.28	93.25	94.43	95.98	93.59
	0.31	1.25	0.63	0.69	0.42	0.97	0.90
Medicare Status <sup>3</sup>							
Aged							
65 - 74 years	91.31	70.64	91.57	92.55	93.77	96.26	92.43
	0.58	2.49	1.27	1.10	0.71	1.28	1.22
75 - 84 years	93.87	84.44	94.98	93.37	94.57	96.80	94.97
	0.41	2.24	1.02	0.91	0.74	1.02	1.17
85 years and older	93.26	79.58	91.64	95.13	94.79	95.27*	93.50
	0.69	4.66	1.59	1.25	1.14	3.38	1.95
Disabled							
Under 45 years	86.88	76.89	86.76	96.89*	93.83	100.00*	100.00*
	1.38	4.12	1.61	3.11	2.46	0.00	0.00
45 - 64 years	92.73	84.93	94.14	93.66*	97.80	86.87*	94.15*
	1.11	3.25	1.19	4.74	1.16	11.83	2.96
Gender							
Male	89.86	74.53	87.78	91.84	93.66	95.48	91.75
	0.53	2.09	1.27	1.10	0.68	1.72	1.52
Female	94.17	83.91	95.08	94.20	95.14	96.38	94.87
	0.38	2.19	0.66	0.77	0.59	1.11	0.83
Living Arrangement							
Alone	92.57	74.82	93.87	94.32	94.88	97.30	93.81
	0.49	2.53	0.97	0.79	0.85	1.01	1.65
With spouse	92.94	80.82	92.50	92.55	94.52	95.21	94.59
	0.44	2.03	1.59	0.88	0.57	1.46	1.16
With children	91.13	74.99	92.92	93.56	93.87	96.47*	92.62
	1.08	4.63	1.34	2.31	1.55	3.61	2.28
With others	88.49	81.30	88.61	94.91	92.24	100.00*	84.99
	1.36	4.33	1.73	2.36	2.36	0.00	5.46

**Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Prescribed Medicine							
All Beneficiaries	92.24	78.30	92.28	93.25	94.43	95.98	93.59
	0.31	1.25	0.63	0.69	0.42	0.97	0.90
Race/Ethnicity							
White non-Hispanic	92.88	81.00	92.09	93.32	94.81	95.49	93.90
	0.31	1.65	0.86	0.69	0.46	1.09	0.96
Black non-Hispanic	89.08	72.67	91.80	89.25	92.80	100.00*	93.73
	1.09	3.83	1.05	4.61	1.97	0.00	3.46
Hispanic	91.43	73.30	93.48	97.38	92.00	100.00*	92.80
	1.32	6.42	1.77	1.78	2.37	0.00	2.32
Other	90.43	71.25*	93.35	93.51	92.62	100.00*	88.50*
	2.08	10.80	2.61	3.72	2.72	0.00	4.15
Income							
Less than \$5,000	84.46	45.82*	93.15	91.42	91.89	84.47*	90.79*
	2.77	9.02	1.92	3.89	4.83	15.48	3.74
\$5,000 - \$9,999	89.63	72.65	91.98	94.90	86.55	100.00*	89.00
	0.83	4.27	1.06	1.82	3.90	0.00	4.27
\$10,000 - \$14,999	90.78	78.24	93.06	94.36	91.40	88.18*	94.92
	0.73	3.00	1.22	1.31	1.52	9.28	1.83
\$15,000 - \$19,999	93.28	86.75	90.97	94.32	94.57	96.90*	95.49
	0.80	2.60	2.98	1.32	1.37	2.27	1.33
\$20,000 - \$24,999	93.37	79.58	87.59*	92.69	97.13	97.91	92.75
	0.77	4.86	4.96	1.41	0.85	1.52	2.52
\$25,000 - \$29,999	91.89	88.92	100.00*	90.21	92.51	93.13	92.73
	1.09	6.33	0.00	2.97	1.54	4.71	3.06
\$30,000 - \$39,999	94.54	87.04	89.94*	93.18	95.04	97.83	96.88
	0.77	5.85	8.08	1.63	0.89	1.58	1.21
\$40,000 - \$49,999	93.40	87.03*	100.00*	91.13	94.90	97.04	89.44
	0.97	6.14	0.00	2.71	1.24	2.06	3.07
\$50,000 or more	94.36	69.02*	100.00*	94.10	95.76	96.04	93.01
	0.67	8.87	0.00	1.14	0.79	1.49	2.67

**Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Prescribed Medicine							
All Beneficiaries	92.24	78.30	92.28	93.25	94.43	95.98	93.59
	0.31	1.25	0.63	0.69	0.42	0.97	0.90
Health Status							
Excellent	84.89	61.57	76.30	86.88	87.15	95.61	87.64
	1.15	3.85	4.04	1.93	1.60	1.70	2.66
Very good	91.14	71.67	85.00	91.71	94.63	97.23	93.09
	0.61	3.41	2.27	1.17	0.72	1.50	1.21
Good	94.55	82.76	93.85	95.53	96.61	95.06	96.25
	0.43	2.96	0.97	0.79	0.63	1.50	1.17
Fair	94.75	80.76	96.12	98.33	97.51	93.75	94.29
	0.51	3.05	0.71	0.86	0.64	5.93	1.73
Poor	94.80	93.95	94.40	96.57	94.50	100.00*	94.92
	0.84	2.49	1.42	2.12	1.65	0.00	3.18
Functional Limitation							
None	90.44	71.72	88.43	91.02	93.60	95.91	92.47
	0.45	2.18	1.38	0.96	0.57	1.11	1.08
IADL only <sup>4</sup>	94.78	87.09	93.30	97.24	96.07	97.06	95.77
	0.46	2.46	1.03	0.74	0.77	1.49	1.18
One to two ADLs <sup>5</sup>	95.19	86.58	96.36	97.41	95.66	100.00	94.62
	0.61	3.69	0.99	1.11	1.20	0.00	1.99
Three to five ADLs	94.14	85.14	94.91	95.61	95.61	73.01*	97.95
	1.03	4.23	1.33	2.37	1.69	20.79	2.13

**Table 3.5 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**Community-Only Residents<sup>1</sup>

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Beneficiary Characteristic	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO <sup>2</sup>
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Percentage of Beneficiaries with at Least One Prescribed Medicine							
All Beneficiaries	92.24	78.30	92.28	93.25	94.43	95.98	93.59
	0.31	1.25	0.63	0.69	0.42	0.97	0.90
Metropolitan Area Resident							
Yes	92.35	77.32	92.18	92.98	94.28	97.39	93.51
	0.35	1.64	0.75	0.80	0.48	0.78	0.93
No	92.27	81.05	92.41	94.08	95.17	93.31	95.95
	0.55	1.92	1.02	1.31	0.79	1.93	2.64

Source: Medicare Current Beneficiary Survey, CY 2004 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

Values followed by an asterisk (\*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 HMO stands for Health Maintenance Organization.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 IADL stands for Instrumental Activity of Daily Living.
- 5 ADL stands for Activity of Daily Living.

**Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**

All Medicare Beneficiaries

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Beneficiary Characteristic	Total <sup>1</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance <sup>2</sup>	
			Medicaid	Private Insurance
Percentage of Beneficiaries with at Least One Short- or Long-Term Facility Stay				
All Beneficiaries	8.63	7.69	22.31	4.78
	0.20	0.68	0.88	0.23
Medicare Status <sup>3</sup>				
Aged				
65 - 74 years	2.88	1.98*	12.79	1.42*
	0.25	0.70	1.36	0.24
75 - 84 years	9.53	13.15*	27.94	5.82
	0.36	2.57	1.80	0.44
85 years and older	29.42	40.98	53.57	19.33
	1.07	2.97	2.56	1.16
Disabled				
Under 45 years	7.67	2.21*	10.27	1.82*
	0.76	0.97	1.02	1.05
45 - 64 years	8.30	1.16*	17.02	1.31*
	0.98	0.32	2.06	0.82
Gender				
Male	6.91	5.22*	20.01	3.83
	0.31	0.93	1.18	0.36
Female	9.98	11.13	23.68	5.55
	0.29	1.26	1.14	0.34
Marital Status				
Married	4.00	4.65*	13.30	2.99
	0.23	0.92	1.49	0.24
Widowed	14.19	15.94	30.07	8.49
	0.50	1.71	1.52	0.56
Divorced/separated	8.14	4.51*	14.73	4.15*
	0.70	1.17	1.62	0.96
Never married	19.89	6.86*	28.06	8.73*
	1.33	2.35	1.81	1.99

**Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**

All Medicare Beneficiaries

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Beneficiary Characteristic	Total <sup>1</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance <sup>2</sup>	
			Medicaid	Private Insurance
Percentage of Beneficiaries with at Least One Short- or Long-Term Facility Stay				
All Beneficiaries	8.63	7.69	22.31	4.78
	0.20	0.68	0.88	0.23
Race/Ethnicity				
White non-Hispanic	9.19	9.89	29.96	5.10
	0.24	0.94	1.33	0.28
Black non-Hispanic	8.85	2.40*	17.00	2.64*
	0.95	1.24	1.82	0.86
Hispanic	5.14	3.53*	8.23	3.74*
	0.51	2.25	1.17	1.02
Other	4.48*	0.00	9.91*	1.31*
	0.86	0.00	2.06	0.75
Income				
Less than \$5,000	11.84	7.67*	20.04	3.20*
	1.58	3.51	3.19	1.30
\$5,000 - \$9,999	16.48	5.63*	20.82	8.06*
	0.87	1.23	1.17	1.20
\$10,000 - \$14,999	11.83	8.68*	23.35	6.95
	0.72	1.50	1.64	0.83
\$15,000 - \$19,999	8.20	6.28*	21.79	6.30
	0.71	1.88	2.48	0.83
\$20,000 - \$24,999	7.19	10.07*	37.40*	4.97
	0.81	2.52	7.09	0.75
\$25,000 - \$29,999	7.01	8.76*	37.14*	5.89*
	0.78	2.67	10.65	0.81
\$30,000 - \$39,999	5.00	5.52*	45.41*	4.44
	0.56	1.94	10.30	0.54
\$40,000 - \$49,999	3.50*	4.13*	14.04*	3.32*
	0.57	3.01	7.95	0.59
\$50,000 or more	2.81	12.54*	26.86*	2.34*
	0.35	3.26	19.80	0.38

**Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**

All Medicare Beneficiaries

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Beneficiary Characteristic	Total <sup>1</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance <sup>2</sup>	
			Medicaid	Private Insurance
Percentage of Beneficiaries with at Least One Short- or Long-Term Facility Stay				
All Beneficiaries	8.63	7.69	22.31	4.78
	0.20	0.68	0.88	0.23
Health Status				
Excellent	3.17	2.86*	13.91*	1.96*
	0.37	1.16	2.56	0.32
Very good	3.79	4.72*	13.92	2.57
	0.37	1.27	1.70	0.33
Good	7.53	7.55*	19.06	4.66
	0.38	1.29	1.39	0.43
Fair	15.74	10.81*	26.62	9.34
	0.71	1.48	1.59	0.77
Poor	18.12	11.32*	26.80	12.41
	1.29	2.32	2.26	1.58
Functional Limitation				
None	1.54	2.01*	4.18*	1.08
	0.15	0.60	0.64	0.14
IADL only <sup>4</sup>	6.90	3.51*	10.80	6.24
	0.53	1.05	1.44	0.66
One to two ADLs <sup>5</sup>	13.58	8.92*	21.50	10.78
	0.78	1.64	1.79	0.94
Three to five ADLs	45.98	46.11	60.25	28.00
	1.17	4.21	1.58	1.95



**Table 3.6 Facility User Rates for Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2004**

All Medicare Beneficiaries

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Beneficiary Characteristic	Total <sup>1</sup>	Medicare Fee-for-Service Only	Supplemental Health Insurance <sup>2</sup>	
			Medicaid	Private Insurance
Percentage of Beneficiaries with at Least One Short- or Long-Term Facility Stay				
All Beneficiaries	8.63	7.69	22.31	4.78
	0.20	0.68	0.88	0.23
Metropolitan Area Resident				
Yes	8.57	9.07	22.26	4.87
	0.23	0.91	1.09	0.26
No	8.92	5.07*	22.77	4.55
	0.37	1.06	1.02	0.46

Source: Medicare Current Beneficiary Survey, CY 2004 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

Values followed by an asterisk (\*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 The 8.63 percent of Medicare beneficiaries with a facility stay differs from the 6.15 percent of Medicare beneficiaries who either resided full-year in a long-term care facility or part of the year in a long-term care facility, as shown in Table 1.1. User rates in this table include full-year community residents who had short-term facility stays (institutional events), primarily in skilled nursing facilities, that were reported either during a community interview or collected through Medicare claims data. The residence rates in Table 1.1 do not count such people as residing full- or part-year in a long-term care facility.
- 2 Beneficiaries enrolled in Medicare HMOs are not included in individual categories in the table, but are included in the total. Beneficiaries who were not eligible for Medicaid at any time during 2003, but who had individually-purchased private insurance, employer-sponsored private insurance, unknown purchaser for private insurance, or who were enrolled in a private HMO are included in the category *private insurance*.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.